



PUBLIC NOTICE OF DESIGNER SELECTION

Designer Selection Board

One Ashburton Place | Boston, MA | 02108

Telephone: 617-727-4046 | www.mass.gov/dsb

DSB List#:	22-44		
Notice Date:	December 28, 2022		
Submission Deadline:	January 18, 2022	At 2:00 PM	
Project Number:	DSBP-44		
Project Title:	Study and Design for Various Repairs, Renovations, and Upgrades of DMH Hospitals, Mental Health Centers, Administration Buildings, and Group Living Environments		
Project Location:	Statewide		
Awarding Agency:	Department of Mental Health (DMH)		
Estimated Construction Cost:	Varies: Not to exceed authority delegated pursuant to M.G.L. c. 7C §5, for an individual project.		
Contract Term	Up to six (6) years		
Maximum Fee Per Contract (based on the scope of the work and services authorized, shall not exceed)	<u>\$1,000,000</u>		

Contract Type: This contract will be a “House Doctor” contract. Multiple projects of the type described in the Project Overview and Scope of Work may be assigned, and fee increments approved, up to the maximum fee per contract. Selection by the DSB under this advertisement does not guarantee that a contract will be executed with any given firm. The Awarding Agency will enter into House Doctor contract(s) with selected firm(s) at its sole discretion, based on the Awarding Agency’s needs. The Awarding Agency may award up to **six (6)** contracts, each with a total value of **\$1,000,000** to qualified designers under this contract. Awarding Authority may assign a House Doctor with which it has signed a contract to perform individual project(s) of the type described in this advertisement directly for another Commonwealth entity.

Prime Firm Requested

- ☒ Architect
- ☐ Landscape Architect
- ☐ Engineer
- ☐ Interior Designer
- ☐ Programmer
- ☐ Construction Manager

Immediate Service Authorized

- ☒ Draft Study
- ☒ Certifiable Building Study
- ☒ Schematic Plans and Outline Specifications
- ☒ Design Development Plans and Specifications
- ☒ Construction Plans and Specifications
- ☒ Administration and Construction Contract

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AGENCY INFORMATION

The Department of Mental Health (DMH) is an agency within the Executive Office of Health and Human Services (EOHHS). DMH promotes mental health through early intervention, treatment, education, policy and regulation so that all residents of the Commonwealth may live full and productive lives. The Department sets policy, promotes self-determination, protects human rights, and supports mental health training and research. This critical mission is accomplished by working in partnership with other state agencies, individuals, families, providers, and communities. DMH has Central (administrative) Offices, located in Boston and Westboro, as well as hospitals, mental health centers, various facilities, and group living environments / homes located in five areas throughout the state. DMH Facilities are located in the following areas:

Metro Boston Area

1. **Dr. Solomon Carter Fuller Mental Health Center.** 85 E. Newton Street, Boston, MA 02118
2. **Lemuel Shattuck Hospital.** 170 Morton Street Jamaica Plain, MA 02130 (DPH C/C)
3. **Erich Lindemann Mental Health.** 25 Staniford St., Boston, MA 02114 (DCAMM C/C)
4. **Massachusetts Mental Health Center.** 75 Fenwood Road & 20 Vining Street Boston, MA 02115

Central Massachusetts Area

5. **Worcester Recovery Center and Hospital.** 309 Belmont Street, Worcester, MA 01604
6. **South County Site Office.** 40 Institute Road, Oaks "B" Bldg., No. Grafton, MA 01536.
7. **Worcester County Site Office.** 361 Plantation Street, 2nd Floor, Worcester, MA 01605
8. **Hadley Building / Westborough Site Office.** 167 Lyman Street, Westborough, MA 01581
9. **Allen (Residential) Hall Building.** 288 Lyman Street. Westborough, MA 01581.

Northeast Area

10. **Tewksbury State Hospital Hathorne Units.** 365 East Street, Tewksbury, MA 01876
11. **Dr. Harry C. Solomon Mental Health Center.** 391 Varnum Ave, Lowell, MA 01854

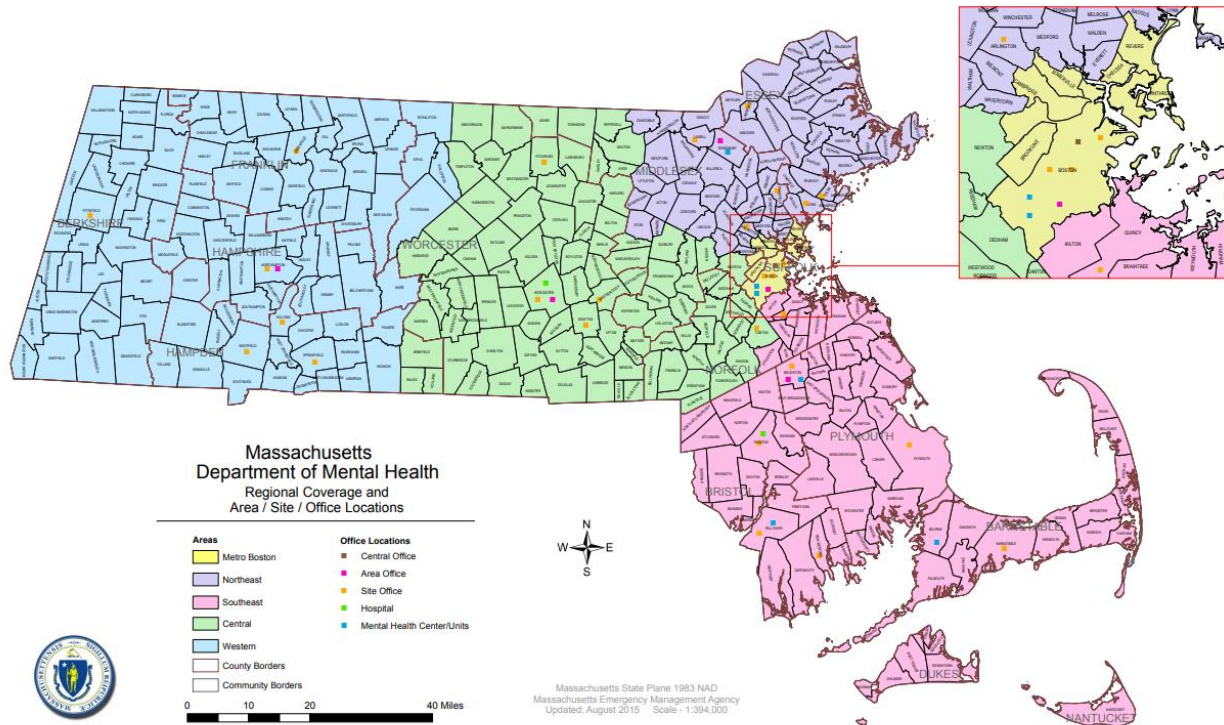
Southeast Area

12. **Taunton State Hospital.** 60 Hodges Ave, Taunton, MA 02780
13. **Pocasset Mental Health Center.** 830 County Road, Pocasset, MA 02559
14. **Brockton Multi-Service Center.** 165 Quincy Street, Brockton, MA 02302
15. **Corrigan Mental Health Center.** 49 Hillside Street, Fall River, MA 02720
16. **Quincy Mental Health Center.** 460 Quincy Avenue Quincy, MA 02169

Western Massachusetts Area

17. **Berkshires Site Office.** 333 East Street, Pittsfield, MA 01201
18. **Sitterly Building.** 13 Prospect St. Greenfield, MA 01301
19. **Haskell Building/Hampshire Site Office.** 1 Prince Street Northampton, MA 01060
20. **Cutchins Programs for Children & Families.** 78 Pomeroy Terrace, Northampton, MA 01060

Map of Regional Coverage Areas: [Department of Mental Health Regional Coverage Map](#)



DMH Map of Regional Coverage Areas

Estimated Percentage of House Doctor Services by Location:

- Hospital Campuses: Worcester Recovery Center - 5%, Taunton State Hospital - 70%, Tewksbury State Hospital - 5%, Solomon Carter Fuller Mental Health Center – 20%
- Mental Health Centers & Facilities: Northampton - 25%, Quincy -5%, Brockton – 5%, Fall River - 20%, Pocasset - 10%, Lowell - 10%, Westboro Campus – 25%)
- Group Living Environments / Homes: approximately 25 homes statewide and work percentages vary

OVERVIEW AND SCOPE OF WORK

The types of services requested will vary by Project. Those services may include, but are not limited to, the following types of projects:

Building Envelope and Roof Replacement: Numerous mental health facilities and hospital buildings (i.e. Taunton State Hospital) consist of aging buildings with historical significance. The buildings' envelopes are failing and need complete repair (slate roofs, asphalt and EPDM roofs, cornices and trim, brick veneer, insulation, windows and doors, etc.) to restore them to "watertight" utilizing newer sustainable materials and incorporating increased energy efficiency. Designs for buildings located at Taunton State Hospital may require approval by the Massachusetts Historical Commission prior to construction.

Elevators and Inclined Lifts: Most of the elevators at the mental health centers, administration buildings, and few at hospitals (i.e. Taunton State Hospital) need full modernization or replacement due to lack of available repair parts. Various locations have inclined lifts that have become obsolete or inoperable due to age. In addition, some locations do not have elevators and it's the Department's initiative to improve accessibility throughout the facilities by adding elevators, inclined lifts, interior and exterior ramps and walkways.

Program Fit Analysis and Interior Space Planning with Renovation: Mental health initiatives throughout the Commonwealth have resulted in the need for additional space. Selected designers may be asked to engage in interior space planning and program reconfiguration studies to repurpose under-utilized buildings or optimize space-use within existing buildings as needed. Phased renovation and modernization of occupied facilities while understanding the needed code improvements are required.

Exterior Landscape: Security courtyards and green spaces need refreshing to create a more welcoming and healing environment. Landscape design plans to include low maintenance hardscape and plantings with recreational amenities. In addition, parking lots at various locations need repair and expansion. Incorporating ADA / MAAB improvement into the travel path design is needed. Underground utilities (water, sewer, drainage) systems at Taunton State Hospital have begun to fail and collapse in the past years, and interim repairs are no longer an option. Selected designers are anticipated to partner with specialized Civil Engineering firms/consultants to evaluate existing conditions and prepare phased designs for systems.

MAAB and Ligature Resistant Renovation Improvements: Projects consist of improvements and upgrades to numerous locations: lobby entrances with enhanced security, client bathrooms with MAAB and ligature resistant fixtures, staff bathrooms and common area enhancements. Joint Commission Accreditation Standards will need be applied in health care hospitals and behavioral health facilities.

Security, Video Surveillance, and Access Control: The safety of the clients, staff, visitors, and building is a top priority of the Department. Various locations need complete replacement due to antiquated technology and equipment. Many buildings need new swipe card access control to prevent unauthorized access into buildings and secure units.

The scope of work may include, but is not limited to:

1. Investigating the nature and severity of the problem(s).
2. Documenting existing conditions.
3. Recommending detailed repairs and magnitude of cost for such repairs.
4. Proposing alternate methods of repairs for resolution of the problem(s), including energy efficient alternatives.
5. Developing the preferred solution to schematic design and/or design development.
6. Preparing construction specifications and documents, cost estimates, and providing construction administration for the solution.
7. Review of best practices in the design of health care and residential care institution facilities.

8. Preparing construction specifications, documents, and cost estimates. Assisting with public bidding and providing construction administration for the project.
9. Planning and design to improve access and mobility to enhance security and safety.
10. Planning and design to improve climate resilience (e.g., stormwater, flooding, heat waves) to reduce operating carbon emissions through low/no carbon fuels.
11. Evaluating re-use suitability, permitting, and related code analysis, investigation of needed repairs, and preliminary cost estimates.
12. Consideration of Executive Order 594 and decarbonization strategies should be prioritized in all architecture decisions, as applicable.
13. Project commissioning.

Analyses should include energy costs, sustainability principles, expected remaining useful life of building systems and related life cycle costs. Particular attention should be paid to the constructability, reliability, durability, and maintainability of building systems and materials.

If the selected House Doctor is appointed for final design, the general scope of services will be defined by the certified building study and may incorporate the current version of the [DCAMM Designer Procedures Manual](https://www.mass.gov/doc/designers-procedures-manual/download).¹

¹ <https://www.mass.gov/doc/designers-procedures-manual/download>

APPLICATION EVALUATION

Applications will be evaluated based on the Designer Selection Board (DSB) criteria for selection of semi-finalist and finalist appearing on the DSB website [the DSB Website](#).² The required House Doctor team and required experience is listed below.

Personnel

1. Architect (Prime Firm)
2. Landscape Architect
3. Civil Engineer
4. Mechanical Engineer (M/P/FP)
5. Electrical Engineer
6. Structural engineer
7. Specifications Consultant
8. Cost Estimator (independent consultant required)
9. MA Building Code Consultant
10. Hazardous Materials Consultant
11. Energy Modeler
12. Retro-Commissioning Agent
13. LEED Consultant
14. Interior Designer

- The title “Architect” refers to design professionals that maintain a current registration with the Massachusetts Board of Registration of Architects; and
- The title “Landscape Architect” refers to design professionals that maintain a current registration with the Massachusetts Board of Registration of Landscape Architects; and the title “Landscape Professional” refers to an individual who may not hold a certificate of registration from the Board of Landscape Architects, but can prove requisite experience, education and training that enable them to perform the landscape design services outlined herein; and
- The title “Engineer” refers to design professionals that maintain a current registration in any one of the engineering categories governed by the Massachusetts Board of Registration of Professional Engineers and of Land Surveyors.
- The title “Interior Designer” refers to design professionals that demonstrate competence by holding a nationally recognized certification.

² <https://www.mass.gov/files/documents/2018/12/19/criteria-for-selection-of-semi-finalists-and-finalists-160707.pdf>

Evaluation Factors

Applications will be evaluated based upon the requirements of M.G.L. C. 7C, § 49 and the work listed on DSB Application Form Sections 4 and 5 which illustrate current qualifications in the following areas:

1. The House Doctor, through their Diversity Focus Statement (in Section 5), shall demonstrate their firm's implementation of Equity, Diversity, and Inclusion (EDI) principles within its organization and within the design profession. The Statement shall:
 - a. Document the firm's track record for meeting and exceeding EDI goals, including the demonstrated track record of the House Doctor for meeting diversity goals, highlighting in particular prior projects that have met or exceeded these goals;
 - b. Specify the firm's approach toward assembling the team for this project, both with internal staff and the inclusion of Minority Owned Business Enterprise (MBE)/Woman Owned Business Enterprise (WBE)/Veteran Owned Business Enterprise (VBE) firms; and
 - c. Detail the experience of the working relationships among the team, including a description of the roles and responsibilities among the team members assigned to this project.
2. Show extensive knowledge and background in project development and management in public or private healthcare facilities, specifically behavioral healthcare facilities with 24-7 services and a variety of populations subject to Joint Commission Accreditation.
3. Experience in designing phased renovation/modernization projects in occupied healthcare facilities. Demonstrates strong expertise for building code requirements and the Joint Commission review process.
4. Experience with Behavioral Health Design Guide and Ligature Resistant Specialty Improvements a plus. References to these standards are located in the Supporting Documents section below.
5. Experience with MGL Chapter 149 (vertical construction).
6. Key team members will have demonstrated experience in leading and facilitating projects which target high efficiency and climate resiliency in design and systems, including knowledge of Passive House and Net Zero building design principles, resilient design, considerations of site-specific resilience enhancements, decarbonization of fossil fuel systems, the integration of architectural elements and mechanical systems, and strategic electrification.

SUPPORTING DOCUMENTS

The scope of work for the House Doctor projects is supported by the materials listed below.

1. Patient Safety Standards, Materials and Systems Guidelines Recommended by the New York State Office of Mental Health, 28th Edition, revised July 31, 2022: [Patient Safety Standards Guidelines \(ny.gov\)](#)
2. Behavioral Health Design Guide 2022; [Behavioral Health | AHA](#)

PROCUREMENT REQUIREMENTS

Procurement requirements for this public notice include, but are not limited to:

Affirmative Marketing

AMP law, c. 7C, s.6 applies to two categories of projects 1) DCAMM projects, and 2) state funded municipal projects. All other governmental agencies or entities are asked and given the choice/option to adopt AMP goals.

While client agencies are not required to adopt MBE and WBE goals, DCAMM strongly encourages agencies to set goals to further Commonwealth's AMP goals.

If your agency would like to adopt AMP goals, please 1) indicate your approval, and 2) provide a percentage breakdown of scope disciplines (Ex. 65% Architect, 35% Engineering) for this public notice to help set your goals to compliance.DCAMM@mass.gov.

MBE/WBE Participation

The Commonwealth is committed to helping address the disparity in the participation of minorities and women in design. Along with the MBE and WBE participation goals which reflect ownership status set forth below, the DSB and the Awarding Agency are interested in learning about the applicant firm's approach and commitment to diversity in its HR policy, its overall business practices and in assembling this project team. Firms are encouraged to be creative in assembling their teams by considering dividing the work of a particular discipline, when appropriate, including work it would typically provide in house, partnering, offering opportunities to qualified firms with which it or its consultants have not previously worked or firms that may have less experience working on public projects, and other means that provide additional opportunities for MBE and WBE firms in new ways.

House Doctor applicants should include in their application, under Section 5, a Diversity Focus Statement directly addressing their approach to enhancing diversity in assembling the team for this project, including a clear description of each working relationship, and in their overall HR and business practices. The DSB strongly encourages teams composed of firms that expand the overall breadth of different firms working on Awarding Agency projects. See also the Evaluation Factors listed above.

In accordance with M.G.L. C.7C, §6 and Executive Orders 565 and 592, the **Awarding Agency** has established minimum MBE and WBE participation goals of **5.6% MBE and 10.8% WBE** of the overall value of the study and final design contracts for this Contract. Applicants must utilize both MBE and WBE firms whose participation meet these separate participation goals set for the Contract. The separate MBE and WBE participation goals must be met within the list of requested prime and sub-consultants and those MBE and WBE firms with which they team. MBE and WBE firms providing extra services, such as surveying or testing, can also contribute to the MBE and WBE participation on the project.

All applicants must indicate in their applications how it or its consultants will meet these goals and will be evaluated on that basis. Further information about the MBE and WBE participation program appears in the “Participation by Minority Owned Businesses and Woman Owned Businesses,” in the Commonwealth of Massachusetts Contract for House Doctor Services at Exhibit F, and a list of firms currently MBE or WBE certified appears on the [Supplier Diversity Office website](#).³

Applications from MBE and WBE firms as prime consultant are encouraged. Applicants that are themselves MBE or WBE certified may use their participation toward meeting the goal for the certification they hold and will be required to bring participation by additional firm(s) that holds the necessary Supplier Diversity Office certifications to meet or exceed the goals on this Contract. Applicants are strongly encouraged to utilize multiple disciplines and firms to meet the MBE and WBE goals. Consultants to the prime can team within their disciplines in order to meet the MBE and WBE goals but must state this relationship on the organizational chart (Section 6 of the application form). Please note that only firms that are currently Massachusetts Supplier Diversity Office certified as MBE or WBE can be credited toward meeting project MBE or WBE goals.

Additional Diversity Programs:

Veteran Owned Business Participation Benchmark – Chapter 108 of the Acts of 2012; Executive Order 565

The Commonwealth encourages the participation of Service-Disabled Veteran-Owned Business Enterprises (SDVOBE) and VBEs on its design projects. The benchmark for combined SDVOBE and VBE participation on design projects is 3% of the contract price.

In addition, the Commonwealth encourages the participation of Disability-Owned Business Enterprises (DOBEs) and Lesbian, Gay, Bisexual, and Transgender Business Enterprises (LGBTBEs) firms on its design projects. See Executive Order 565 -No. 565: Reaffirming and Expanding the Massachusetts Supplier Diversity Program | Mass.gov.

Energy, Sustainability and Climate Change Adaptation

Executive Order 569: Establishing an Integrated Climate Change Strategy for the Commonwealth

Tasks undertaken by the House Doctor shall comply with all applicable requirements of [Executive Order 569](#).⁴

³ <https://www.mass.gov/orgs/supplier-diversity-office-sdo>

⁴ <https://www.mass.gov/executive-orders/no-569-establishing-an-integrated-climate-change-strategy-for-the-commonwealth>

Project teams are required to complete both the DCAMM Climate Resilience Checklist and Resilient MA's [Climate Resilience Design Standards Tool](#)⁵ for each project.

Executive Order 594: Leading by Example – Decarbonizing and Minimizing Environmental Impacts of State Government

In support of the Commonwealth's commitment to sustainable design, the design team is expected to identify and integrate carbon reduction strategies including, but not limited to, low/no carbon fuel sources, high efficiency measures, and renewable energy sources such as geothermal and solar. Civil and landscape design should emphasize water conservation, integrated storm water management, and low-maintenance ecologically appropriate planting design. Projects undertaken under this contract shall comply with all applicable requirements of Executive Order 594 (EO 594) or the most recent Leading by Example Executive Order (see, especially, Section 3 – Standards for New Construction and Section 4 - Information about requirements for existing buildings). See [Executive Order 594](#).⁶

Building studies may include preliminary estimates of the project's energy use, water use, and greenhouse gas emissions using protocols established by EOEEA or as determined by Awarding Agency. No building study shall be certified for final design unless all means, methods, and commitments required to mitigate the project's impact on the operating agency's plan for meeting goals of the relevant Executive Orders are documented in the consensus solution, implementation plan and estimated construction cost.

Universal Design/Accessibility

Universal Design

Design solutions provided under this contract are expected to meet the diverse and changing needs of users across age, ability, language, ethnicity and economic circumstance. The Commonwealth welcomes innovative design strategies that are usable by the widest range of people operating in the widest range of situations without the need for special or separate design. The House Doctor is expected to utilize the [Goals of Universal Design](#)⁷ as guidance for applying Universal Design solutions to the project.

Accessibility

The House Doctor's team must comply, at a minimum, with 521 CMR, The Rules and Regulations of the [Architectural Access Board](#)⁸ as well as the [2010 ADA Standards for Accessible Design](#)⁹ If the

⁵ https://resilientma.mass.gov/rmat_home/designstandards/?focus=I2dyYW50QmFubmVySGVhZGVy

⁶ <https://www.mass.gov/executive-orders/no-594-leading-by-example-decarbonizing-and-minimizing-environmental-impacts-of-state-government>

⁷ <https://idea.ap.buffalo.edu/about/universal-design/>

⁸ <https://www.mass.gov/orgs/architectural-access-board>

⁹ <https://www.ada.gov/regs2010/2010ADASTandards/2010ADASTandards.htm>

requirements of these two laws differ, the House Doctor's team shall comply with the one that provides the greater degree of accessibility.

The House Doctor's team is also expected to understand and reflect in its design the civil rights obligations of the Commonwealth under Title II of the [Americans with Disabilities Act](#)¹⁰ to provide equal access to programs, services, activities and comply with ADA scope requirements for alteration of primary function areas, as applicable. If required on House Doctor team, the House Doctor will use its accessibility consultants to provide technical assistance and oversight for accessibility compliance during the study, design, and construction process, including accessibility audits of existing buildings.

The House Doctor will incorporate the work of the accessibility consultant into their construction documents. If an accessibility consultant is assigned, then the House Doctor must review and incorporate the accessibility consultants' findings into their proposed work. Assignment of an accessibility consultant does not relieve the House Doctor, or their code consultant of their obligation to make sure all accessibility requirements are met on the project.

Policies & Procedures

Financial Statement

M.G.L. c. 7C, §51 requires that on public design contracts where the total design fee is expected to exceed \$30,000 and for the design of a project for which the estimated construction cost is expected to exceed \$300,000 the Designer shall:

- a) File its latest CPA or PA audited financial statement with the Awarding Agency, and continue to do so annually throughout the term of the contract; and
- b) Submit a statement from a CPA or PA that states that they have examined management's internal auditing controls and expresses their opinion regarding those controls to the Awarding Agency.

DCAMM Deferred Maintenance Procedures

The House Doctor must be familiar with the procedures established in DCAMM Deferred Maintenance New Study Template revised in November 2022: [Deferred Maintenance | Mass.gov](#)¹¹

Environmental and Other Supplemental Services

Development of any hazardous materials assessments, specifications, and documents will be provided through the Hazardous Materials Consultant design team member identified above. The Awarding Agency reserves the right to obtain supplemental services through independent consultants who will

¹⁰ https://www.ada.gov/regs2010/titleII_2010/titleII_2010_regulations.htm

¹¹ <https://www.mass.gov/service-details/deferred-maintenance>

collaborate with the House Doctor's team. These supplemental services may include, but are not limited to, asbestos inspection and monitoring, and indoor air quality testing and monitoring.

Construction Specifications

The Designer shall utilize the DCAMM Standard Specification or AIA format and MassDOT Unit Nomenclature for horizontal construction, located here: <https://www.mass.gov/orgs/highway-division>

Cost Estimating

Cost estimates, cost models, and estimator participation in both the study and the design phases shall meet the requirements of the current DCAMM Cost Estimating Manual and will be submitted in Uniformat II in the study phase and in both Uniformat II to Level 3 and CSI Masterformat or other mutually agreeable format in the design phase.

Building Information Modeling (BIM)

Building Information Modeling (BIM) will be used in the study, design, and construction phases of the project. The BIM List of Services can be found [here](#).¹²

This List of Services document is a general statement of Awarding Agency's current requirements regarding the use of BIM technology in agency projects. The specific requirements regarding use of the BIM will vary depending on the nature of the project, the levels of development delineated in the Awarding Agency's approved BIM Execution Plan for the project, and the diverse purposes for which Awarding Agency will use the BIM during the life cycle of the facility from design through facility operations. In all instances, the language of the project contract(s) will be controlling.

Building Commissioning

The Awarding Agency may retain an independent third-party building commissioning agent as part of a particular project. The commissioning agent will develop in collaboration with Awarding Agency an operations and maintenance plan as a reimbursable expense during the building commissioning phase. The commissioning agent will meet with Awarding Agency and the House Doctor's team during planning, design, and construction to evaluate design proposals and make recommendations to ensure the maintainability and operational efficiency of the new building.

Integrated Project Delivery Approach/Lean Construction Tools

To the extent allowed under the Commonwealth public procurement laws and regulations, Awarding Agency may elect to use some aspects of an Integrated Project Delivery (IPD) approach, as generally described in the AIA document [Integrated Project Delivery: A Guide \(2007\)](#).¹³ To the extent the IPD approach and/or Lean Construction Tools conflict with Awarding Agency's contract terms or the laws governing Awarding Agency, then the contract documents and laws shall take precedence. Awarding

¹² <https://www.mass.gov/doc/bim-list-of-services/download>

¹³ https://zdassets.aiacontracts.org/ctrzdweb02/zdpdfs/ipd_guide.pdf

Agency 's preliminary approach to IPD will use CM procurement with the goal that Awarding Agency, House Doctor, CM, trade partners, and other key stakeholders will work as an integrated project delivery team within the existing statutory and contractual frameworks.

Awarding Agency may elect to use Lean Construction Tools as part of the IPD project delivery approach. The Lean Tools that Awarding Agency may use in connection with the project include Value Stream Mapping, Set Based Design, Target Value Design, A3 Decision-making, and Last Planner™ - (see the [Lean Construction Institute Glossary](https://leanconstruction.org/glossary/)¹⁴ for informational purposes).

CONTRACT REQUIREMENTS

Awarding Agency may elect to use a customized version of DCAMM's [Contract for House Doctor Services](https://www.mass.gov/doc/contract-for-house-doctor-services/download).¹⁵ A non-customized version is available at <https://www.mass.gov/doc/contract-for-house-doctor-services/download>

Applicants are advised that certain documents are required as a condition of contract execution, including, without limitation, evidence of professional liability insurance in an amount equal to the lesser of \$5,000,000 or 10% of the Project's Fixed Limit Construction Cost, but in no event less than \$250,000 per claim (i.e., minimum coverage of \$250,000 up to \$5,000,000 per claim depending on the construction cost). Evidence of pollution liability coverage in compliance with the Contract requirements may be carried by the Hazardous Materials Consultant identified above. All other coverage must be carried by the House Doctor.

CONDITIONS FOR APPLICATION

Before a designer can apply for a project within DSB jurisdiction, they must file a written "disclosure statement" in accordance with M.G.L. c. 7C, § 48. The statement provides the basis for the DSB informational database and verifies that the designer meets certain general qualification and ownership requirements detailed in M.G.L. c. 7C, §§ 44 and 48. To help firms meet this requirement, the DSB provides an online registration system that can be accessed [here](https://dsb.formverse5.com/FORMVERSESERVER-DSB/WebApp/Login.aspx).¹⁶ Firms must register on this platform to submit the required disclosure statement; paper disclosure statement submissions are no longer accepted. As part of applying for a particular project, firms must verify that the information provided remains accurate and up-to-date or, if necessary, submit updated information.

APPLICANTS PLEASE NOTE

Applicants are required to use the [Designer Selection Board Online Portal](https://dsb.formverse5.com/FORMVERSESERVER-DSB/WebApp/Login.aspx).¹⁷ New users can request credentials through the system [login screen](https://dsb.formverse5.com/FORMVERSESERVER-DSB/WebApp/Login.aspx).¹⁸

¹⁴ <https://leanconstruction.org/glossary/>

¹⁵ <https://www.mass.gov/doc/contract-for-house-doctor-services/download>

¹⁶ <https://www.mass.gov/service-details/dsb-online-registration-process>

¹⁷ <https://dsb.formverse5.com/FORMVERSESERVER-DSB/WebApp/Login.aspx>

¹⁸ <https://dsb.formverse5.com/FORMVERSESERVER-DSB/WebApp/Login.aspx>